



State of Washington
Application for a Water Right Permit

☐ SURFACE WATER ☒ GROUND WATER
☒ Permanent ☐ Temporary ☐ Short Term

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO
THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

Applicant/Business Name: United States Forest Service	Phone No: 541-308-1700	Other No:
Address: 902 Wasco Avenue Suite 200		
City: Hood River	State: OR	Zip: 97031
Email Address (optional):		

Contact Name (if different from above): Chuti Fiedler	Phone No: 541-308-1718	Other No:
Relationship to Applicant: Self		
Address: 902 Wasco Avenue Suite 200		
City: Hood River	State: OR	Zip: 97031
Email Address (optional): cfiedler@fs.fed.us		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: Provide running water to a complex of ponds to enhance western pond turtle habitat and to create a perennial wetland above the first pond.

Anticipated length of time to complete your project: 2009

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only)		Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input type="checkbox"/> Cubic Feet per Second (CFS)	<input checked="" type="checkbox"/> Gallons per Minute (GPM)		
Create and enhance western pond turtle habitat	2			Continuously
Create perennial wetland	2			Continuously
TOTAL:				

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

For Ecology Use	APPLICATION NO: <u>G 2-3 0484</u>	SEPA: Exempt/Not Exempt
	Fee Paid: _____ Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned <u>7/24/08</u>	By <u>SC</u>	Priority Date <u>7/21/08</u> By <u>SC</u> WRIA: <u>29</u>

If yes to either question above, indicate the dates that the water will be needed:

FROM: ____/____/____ TO: ____/____/____

For Ecology Use	APPLICATION NO: _____				SEPA: Exempt/Not Exempt				
	Fee Paid: _____		Check No: _____		ECY Coding: 001-001-WR1-0285-000011				
Date Returned _____		By _____		Priority Date _____		By _____		WRIA: _____	

Section 3. POINT OF DIVERSION OR WITHDRAWAL

Complete A or B, and C below

A.) If Surface Water Source	B.) If Ground Water Source
<input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____
Source Name: _____	Well diameter & depth: 6 in. and 145 ft.
Tributary to: _____	Number of proposed points of withdrawal: 1
Number of proposed diversion points: _____	Do you have an existing well? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO	If available, attach Water Well Report and pump test.
	Well Tag ID No. Attached _____

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
03-08-36-0-0-0102-00	NE	NE	36	3 N.	8 E.	Skamania
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:
_____ Feet (☐ North/☐ South) and _____ feet (☐ East/☐ West)
from the (☐NW ☐SW ☐NE ☐SE ☐) corner of Section _____.

Parcel No.	¼	¼	Section	Township	Range	County
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:
_____ feet (☐ North/☐ South) and _____ feet (☐ East/☐ West)
from the (☐NW ☐SW ☐NE ☐SE ☐) corner of Section _____.

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☒ YES ☐ NO
If no, do you have legal authority to make this application for use of another’s land? ☐ YES ☐ NO
Provide the owner name(s), address, and phone number: _____

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

Warranty deed attached.

¼	¼	Section	Twp.	Range	County	Parcel No.

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.
If no, do you have legal authority to make this application for use of another’s land? ☐ YES ☐ NO
Provide owner name(s), address, and phone number: _____

Are there any other water rights or claims associated with this property or water system? ☐ YES ☒ NO
If yes, provide the water right and/or claim numbers: _____

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): We will be pumping water out of an existing well using a solar powered pump. The water will spill over the land above the first pond, creating a shallow wetland. The water will then travel from the first pond to the second pond through an underground PVC pipe. When the second pond reaches a certain depth the water will hit a drain that will direct the water through another underground pipe system which dumps into Collins Creek, approximately 300 feet to the west. Each pond is about 4600 cubic feet in volume. We will be using a solar powered pumping system that provides 450 Watts of power, running at 0.47 horsepower. The solar panels will be located on a south facing slope near the well. The capacity of the pump is 3.3 gallons/min., but our needs will require less.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

Complete A or B, and C below

A.) Domestic Water Systems only	B.) Municipal Water Systems only <small>(defined under RCW 90.03.015)</small>
Projected number of connections to be served: <u>None</u>	Present population to be served water: _____
Type of connections: _____ <small>(e.g., home, recreational cabin)</small>	Estimate future population to be served: _____ (20 year projection)

C.) Water System Planning

Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? ☐ YES ☒ NO

If yes, date plan was approved ____/____/____ Water System Number: _____

Name of water system: _____

Are you within the service area of an existing water system? ☐ YES ☒ NO

If yes, explain why you are unable to connect to the system: _____

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = N/A ACRES
NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock:N/A

Is the proposed project for a dairy farm? ☐ YES ☒ NO

Other Proposed Farm Uses

Describe all proposed uses: N/A

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☒ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head N/A and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: N/A

Other Use

Providing habitat for western pond turtle and creating perennial wetland

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☒ YES ☐ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☐ YES ☒ NO

If you answered yes to any of the above questions, please describe: Water from the well will be pumped into an existing series of 2 constructed ponds, but will overflow into Collins Creek when depth of second pond reaches greater than 9 feet.

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site:From White Salmon, WA head west along highway 14. Turn right at Bergen Rd., about a quarter mile after the Dog Mountain trail head. Take right at fork in road, staying on Bergen. Very quickly, there is a junction of Bergen and Mt. Glade road, stay straight up road (north) and travel onto dirt/gravel driveway. From Stevenson head east along highway 14. Turn left at Bergen Rd. Rest of directions the same.

Site Address:681 Bergen Rd./Home Valley

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

<u>Daniel T. Hankenrider</u> Print Name <u>USFS Scenic Area Manager</u> (Applicant or authorized representative)	<u>Daniel T. Hankenrider</u> Signature	<u>7/31/08</u> Date
<u>N/A</u> Print Name (Landowner of Place of Use)	Signature	Date
<u>N/A</u> Print Name (Landowner of Place of Use)	Signature	Date
<u>N/A</u> Print Name (Landowner of Place of Use)	Signature	Date

Submit your application to: DEPARTMENT OF ECOLOGY
CASHIERING SECTION
PO BOX 5128
LACEY WA 98509-5128

Please check the region in which your proposed project is located.
☒ Southwest ☐ Northwest ☐ Central ☐ Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.